

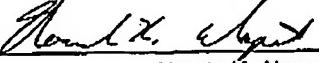
RECEIVED

003

CENTRAL FAX CENTER

DEC 20 2005

PTO/SB/22 (12-04)
WCSR Form (12/2004)

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i>		Docket No.: A202 1050																
Serial Number	10/068,686	Filed February 6, 2002																
In re Application of	Libby et al.																	
For:	Multi-Task Window																	
Group Art Unit:	2673	Examiner: Nguyen, Jimmy H.																
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table border="1"> <thead> <tr> <th></th> <th style="text-align: center;">Fee</th> <th style="text-align: center;">Small Entity</th> <th></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="text-align: center;">\$ 120</td> <td style="text-align: center;">\$ 60</td> <td>\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: center;">\$ 450</td> <td style="text-align: center;">\$ 225</td> <td>\$ _____</td> </tr> <tr> <td colspan="3"></td> <td style="text-align: right;"><u>\$330.00</u></td> </tr> </tbody> </table> <p>(One month already paid - \$450 minus 120)</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>09-0528</u>.</p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input type="checkbox"/> attorney or agent of record.</p> <p><input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) <u>39,893</u></p>				Fee	Small Entity		<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ 120	\$ 60	\$ _____	<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ 450	\$ 225	\$ _____				<u>\$330.00</u>
	Fee	Small Entity																
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ 120	\$ 60	\$ _____															
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ 450	\$ 225	\$ _____															
			<u>\$330.00</u>															
 Nanda K. Alapati		December 20, 2005 Date Telephone Number: 703-394-2216																
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below																		
<input type="checkbox"/> _____ forms are submitted.																		

12/22/2005 BABRAHAI 00000001 090528 10068686

02 FC:1252 330.00 DA

WCSR 1747409V1